

County: Eau Claire
DOVE HEALTHCARE NURSING & REHABILITATION
1405 TRUAX BOULEVARD

Facility ID: 2470

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EAU CLAIRE 54703 Phone:(715) 552-1030
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/02): 140
Total Licensed Bed Capacity (12/31/02): 140
Number of Residents on 12/31/02: 136

Ownership: Limited Liability Company
Highest Level License: Skilled
Operate in Conjunction with CBRF? Yes
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 132

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)		%	
-----		-----				-----		-----	
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		49.3	
Supp. Home Care-Personal Care	No	-----				1 - 4 Years		33.8	
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	3.7	More Than 4 Years		16.9	
Day Services	No	Mental Illness (Org./Psy)	28.7	65 - 74	11.8			----	
Respite Care	Yes	Mental Illness (Other)	6.6	75 - 84	37.5				100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	37.5	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	2.2	95 & Over	9.6	Full-Time Equivalent			
Congregate Meals	No	Cancer	3.7		----	Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	11.0		100.0	(12/31/02)			
Other Meals	No	Cardiovascular	18.4	65 & Over	96.3	-----			
Transportation	No	Cerebrovascular	8.1	-----		RNs		12.2	
Referral Service	No	Diabetes	4.4	Sex	%	LPNs		3.1	
Other Services	Yes	Respiratory	7.4	-----		Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	9.6	Male	22.1	Aides, & Orderlies			
Mentally Ill	No		----	Female	77.9				
Provide Day Programming for			100.0		----				
Developmentally Disabled	No				100.0				

Method of Reimbursement

			Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total	%
Level of Care			No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Resi- dents	Of All
Int. Skilled Care	0	0.0	0			1	1.4	134	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	0.7
Skilled Care	23	100.0	239			60	87.0	116	5	100.0	145	31	96.9	140	0	0.0	0	7	100.0	186	126	92.6
Intermediate	---	---	---			7	10.1	98	0	0.0	0	1	3.1	140	0	0.0	0	0	0.0	0	8	5.9
Limited Care	---	---	---			1	1.4	85	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	0.7
Personal Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	23	100.0				69	100.0		5	100.0		32	100.0		0	0.0		7	100.0		136	100.0

Admissions, Discharges, and Deaths During Reporting Period			Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02						

Percent Admissions from:			Activities of		% Needing		% Totally		Total
			Daily Living (ADL)		Assistance of		Dependent		Number of
					One Or Two Staff				Residents
Private Home/No Home Health	1.4				0.0		69.9		136
Private Home/With Home Health	3.3				8.8		74.3		136
Other Nursing Homes	2.9				21.3		59.6		136
Acute Care Hospitals	90.2				12.5		64.7		136
Psych. Hosp.-MR/DD Facilities	0.0				43.4		48.5		136
Rehabilitation Hospitals	0.0						8.1		136
Other Locations	2.2								
Total Number of Admissions			Continence		% Special Treatments				%
Percent Discharges To:									
Private Home/No Home Health	38.7		Indwelling Or External Catheter		5.1		Receiving Respiratory Care		8.1
Private Home/With Home Health	16.6		Occ/Freq. Incontinent of Bladder		50.7		Receiving Tracheostomy Care		0.0
Other Nursing Homes	4.8		Occ/Freq. Incontinent of Bowel		32.4		Receiving Suctioning		0.0
Acute Care Hospitals	8.1						Receiving Ostomy Care		2.9
Psych. Hosp.-MR/DD Facilities	0.0		Mobility				Receiving Tube Feeding		0.7
Rehabilitation Hospitals	0.0		Physically Restrained		1.5		Receiving Mechanically Altered Diets		28.7
Other Locations	10.0								
Deaths							Other Resident Characteristics		
Total Number of Discharges	21.8		With Pressure Sores		2.9		Have Advance Directives		77.9
(Including Deaths)	271		With Rashes		8.8		Medications		
							Receiving Psychoactive Drugs		55.1

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

		This Facility	Ownership:	Bed Size:		Licensure:		All	
		%	Peer Group	100-199		Skilled		Facilities	
			Ratio	Peer Group		Peer Group		Ratio	
		%		%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds		94.3	84.7	1.11	85.7	1.10	85.3	1.10	85.1
Current Residents from In-County		81.6	81.6	1.00	81.9	1.00	81.5	1.00	76.6
Admissions from In-County, Still Residing		18.8	17.8	1.06	20.1	0.94	20.4	0.92	20.3
Admissions/Average Daily Census		209.1	184.4	1.13	162.5	1.29	146.1	1.43	133.4
Discharges/Average Daily Census		205.3	183.9	1.12	161.6	1.27	147.5	1.39	135.3
Discharges To Private Residence/Average Daily Census		113.6	84.7	1.34	70.3	1.62	63.3	1.80	56.6
Residents Receiving Skilled Care		93.4	93.2	1.00	93.4	1.00	92.4	1.01	86.3
Residents Aged 65 and Older		96.3	92.7	1.04	91.9	1.05	92.0	1.05	87.7
Title 19 (Medicaid) Funded Residents		50.7	62.8	0.81	63.8	0.80	63.6	0.80	67.5
Private Pay Funded Residents		23.5	21.6	1.09	22.1	1.06	24.0	0.98	21.0
Developmentally Disabled Residents		0.0	0.8	0.00	0.9	0.00	1.2	0.00	7.1
Mentally Ill Residents		35.3	29.3	1.20	37.0	0.95	36.2	0.98	33.3
General Medical Service Residents		9.6	24.7	0.39	21.0	0.45	22.5	0.42	20.5
Impaired ADL (Mean)		51.3	48.5	1.06	49.2	1.04	49.3	1.04	49.3
Psychological Problems		55.1	52.3	1.05	53.2	1.04	54.7	1.01	54.0
Nursing Care Required (Mean)		6.5	6.8	0.96	6.9	0.94	6.7	0.97	7.2